

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                  |  | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>HAL080006</b>                 | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: <b>01</b><br><br>B. WING _____  | (X3) DATE SURVEY<br>COMPLETED<br><br><b>02/04/2015</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>BETHAMY RETIREMENT CENTER</b> |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>909 N SALISBULRY AVENUE<br/>SPENCER, NC 28159</b> |  |  |
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| C 000  | Initial Comments<br><br>This report is of a biennial construction survey done by Bob Getchell and Dennis Harrell on February 4, 2015.<br><br>This facility was submitted or licensed on 12/01/1975 as a Home for the Aged serving 29 residents. On February 17, 1997 a 14 bed addition was built bringing the current capacity up to 43 residents. Therefore the older section of the facility must meet the 1971 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1967 NC State Building Code for D-2 Institutional Occupancy. The newer section of the facility must meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 NC State Building Code for I-2 Institutional Occupancy.<br><br>Deficiencies were noted which will require a plan of correction. | C 000   |  |  |
| C 101  | Existing Licensed Fac- No less than '71 Rules<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS<br>The physical plant requirements for each adult care home shall be applied as follows:<br>(2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and   | C 101   |  |  |

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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| C 101  | Continued From page 1<br><br>Regulations" for "Homes for the Aged and Infirm",<br>copies of which are available at the Division of<br>Health Service Regulation, 701 Barbour Drive,<br>Raleigh, North Carolina, 27603 at no cost;<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, the building fire<br>protection equipment was not maintained in a<br>safe manner. This would effect all residents by<br>not detecting smoke and activating the fire alarm<br>or obstructing sprinkler coverage.<br><br>Findings on 02/04/2015:<br>The office closet has no sprinkler, heat detector,<br>or smoke detector. Provide sprinkler coverage in<br>this closet.<br><br>2. Based on observation, the facility was not<br>maintained in a safe manner by having doors of<br>insufficient rating installed on the corridor. This<br>could affect all residents and staff by not<br>containing smoke and fire in the room of origin.<br><br>Findings on 02/04/2015:<br>The corridor door on room 8 is a 1 3/8 inch thick<br>hollow-core door. Install a 1 3/4 inch solid-core<br>door. | C 101   |  |  |
| C 133  | Bathrooms-Hand Grips<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL<br>ENVIRONMENT<br>(e) The requirements for bathrooms and toilet<br>rooms are:<br>(6) Hand grips shall be installed at all<br>commodes, tubs and showers used by or<br>accessible to residents;   | C 133   |  |  |

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| C 133  | Continued From page 2<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, the building was not maintained in a safe manner because hand grips are coming loose from the wall. This would effect all residents using these toilets by exposing them to fall hazards<br><br>Findings on 02/04/2015:<br>There are loose hand grips at the following toilets:<br>a) Bathroom S4, b) Bathroom S8   | C 133   |  |  |
| C 148  | Corridors-Handrails<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT<br>(g) The requirements for corridors are:<br>(2) Handrails shall be provided on both sides of corridors at 36 inches above the floor and be capable of supporting a 250 pound concentrated load;<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, the building was not maintained in a safe manner because a handrail is coming loose from the wall. This would effect all residents using the handrail by exposing them to fall hazards.<br><br>Findings on 02/04/2015<br>At the right end of the corridor next to the kitchen the handrail is coming loose from the wall.<br>Secure. | C 148   |  |  |
| C 150  | Corridors-Free of equipment and Obstructions<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT  | C 150   |  |  |

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| C 150  | Continued From page 3<br><br>(g) The requirements for corridors are:<br>(4) Corridors shall be free of all equipment and<br>other obstructions.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, the building corridors<br>were not maintained in a safe manner because<br>med carts, wheelchairs and other equipment<br>were blocking egress.<br><br>Findings on 2-4-2014<br>There were med carts, wheelchairs and other<br>equipment blocking the left front and end corridor,<br>and furniture is blocking the back center exit<br>corridor on the left side.   | C 150  |  |  |
| C 189  | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER<br>REQUIREMENTS<br>(a) The building and all fire safety, electrical,<br>mechanical, and plumbing equipment in an adult<br>care home shall be maintained in a safe and<br>operating condition.<br>(k) This Rule shall apply to new and existing<br>facilities with the exception of Paragraph (e)<br>which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, the building was not<br>maintained in a safe manner by not maintaining<br>the fire-resistance rating of building components.<br>This would effect all residents by not containing<br>smoke and fire in the room or smoke<br>compartment of origin.<br><br>Findings on 02/04/2015: | C 189  |  |  |

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| C 189  | <p>Continued From page 4</p> <p>a. The ceiling over the bathtub in room N12 has been patched with metal. Repair with gypsum to restore the fire resistance rating of the ceiling.</p> <p>b. In the storage room ceiling across the hall from the kitchen the sprinkler escutcheon has slid down revealing an unprotected penetration.</p> <p>c. The plastic conduits penetrating the ceiling of the electrical room near room 10 must be filled at the bottom with an approved firerestopping material.</p> <p>d) The Pantry ceiling is split open.</p> <p>Seal with an approved firestopping material that is part of a firestop system that meets ASTM E-814.</p> <p>2. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would effect all residents by not detecting smoke and activating the fire alarm or obstructing sprinkler coverage.</p> <p>Findings on 02/04/2015:</p> <p>a. The duct smoke detectors on the attic HVAC units do not have access doors to inspect and clean the sample tubes.</p> <p>b. In the front of the attic near the kitchen there is a heat detector hanging by the wires.</p> <p>c) In the front center Living Room a smoke damper in a ceiling HVAC vent has activated.</p> <p>d) In the front center Living Room a smoke damper in a ceiling HVAC vent has activated.</p> <p>3. Based on observation, the building exit</p> | C 189   |  |  |

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| C 189  | <p>Continued From page 5</p> <p>signage and emergency illumination were not maintained in a safe manner. This would effect all residents by not keeping the exits visible in an emergency.</p> <p>Findings on 02/04/2015::<br/>Exit signs and emergency lights are not working in the following locations:</p> <p>a) Exit sign near room 1N has the bulbs burned out.</p> <p>b) Exit sign near room 1N needs chevron removed to indicate direction of egress.</p> <p>c) There is no emergency lighting in the south dining room which was constructed in 1997.</p> <p>d) The kitchen Exit light is not working on battery backup.</p> <p>e) Exit sign near room 3N has the bulbs burned out.</p> <p>f) Exit sign near room 8 has no battery backup, and there is no generator.</p> <p>g) At the cross corridor doors at the kitchen, the battery backup on the Exit sign does not work.</p> <p>4. Based on observation, the building plumbing equipment was not maintained in a safe manner by allowing cross connects. This would effect all residents by potentially siphoning waste water into the potable water system.</p> <p>Findings on 02/04/2015:<br/>The following bathroom spray hoses have no vacuum breaker to prevent siphoning: a) Room 6, b) Room S15, c) Room S17, d) Room S4,</p> | C 189   |  |  |

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| C 189  | <p>Continued From page 6</p> <p>e) Room S5.</p> <p>5. Based on observation, the building was not maintained in a safe manner because toilets are coming loose from the floor. This would effect all residents using the toilets by exposing them to leaks from a broken wax seal.</p> <p>Findings on 02/04/2015:<br/>There are toilets coming loose from the floor in the following locations: a) Bathroom at N Hall Nurse Station, b) Employee bathroom near N Hall Nurse Station, c) Bathroom at room 2N, d) Bathroom #9.</p> <p>6. Based on observation, the building electrical components were not maintained in a safe manner because electrical panels were blocked and components were in disrepair.</p> <p>Findings on 02/04/2015:<br/>a) The electrical panels are blocked by stored items in the electrical room near room 10.</p> <p>b) The duplex outlet in the Activity Office is coming loose from the wall.</p> <p>c) The front left end exterior GFCI outlet will not trip, and is missing the weatherproof cover.</p> <p>d) The GFCI outlet to the left of the front door will not trip, and is missing the weatherproof cover.</p> <p>e) The GFCI outlet next to the biordbath out front will not trip, and is missing the weatherproof cover.</p> <p>7. Based on observation, the building plumbing components were not maintained in a safe manner because a shower is damaged. This</p> | C 189   |  |  |

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| C 189  | Continued From page 7<br><br>could effect all residents using the shower by<br>exposing them to a cut hazard.<br><br>Findings on 02/04/2015:<br>The floor of the shower in Bathroom #9 is<br>damaged.<br><br>8. Based on observation, the facility was not<br>maintained in a safe manner by having corridor<br>doors not able to resist the passage of smoke..<br>This could affect all residents and staff by not<br>containing smoke and fire in the room of origin.<br><br>Findings on 02/04/2015:<br><br>Corridor doors have issues in the following<br>locations: a) The bathroom door near room 2N<br>is scrubbing the frame, b) Room 3N door has a<br>gap at the top, c) Room 2N door has a gap at<br>the top, d) Room 2N closet door hardware falling<br>off, e) Storage room door accross from kitchen<br>removed, reinstall. | C 189  |  |  |
| C 195  | Hot Water System<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER<br>REQUIREMENTS<br>(d) The hot water system shall be of such size to<br>provide an adequate supply of hot water to the<br>kitchen, bathrooms, laundry, housekeeping<br>closets and soil utility room. The hot water<br>temperature at all fixtures used by residents shall<br>be maintained at a minimum of 100 degrees F<br>(38 degrees C) and shall not exceed 116 degrees<br>F (46.7 degrees C).<br>(k) This Rule shall apply to new and existing<br>facilities with the exception of Paragraph (e)<br>which shall not apply to existing facilities.  | C 195  |  |  |



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| C 195  | <p>Continued From page 8</p> <p>This Rule is not met as evidenced by:<br/>12. Based on observation, the building hot water system was not maintained in a safe manner because water temperatures exceeded the maximum allowed.</p> <p>Findings on 02/04/2015:</p> <p>The hot water in the bathroom at the N Hall Nurse Station tested at 128 degrees F. The tank was immediately dumped and the thermostat adjusted. Followup testing before departure revealed 102 degrees F. Ensure temperature is maintained between 100 - 116 degrees F.</p> | C 195   |  |  |